

# **HARRISONBURG-ROCKINGHAM COMMUNITY SERVICES BOARD**

**ARBOR HOUSE**  
**CRISIS STABILIZATION PROGRAM**  
**1353 N. MAIN ST.**  
**HARRISONBURG, VA 22802**  
**(540) 438-7170**



# **PARTICIPANT HANDBOOK**

## **ABOUT THIS HANDBOOK**

This handbook will provide you with an overview of the Arbor House Crisis Stabilization Program and give you an idea of what you can expect from staff and what staff will expect from you. It is only a basic outline. Please take the time to read through it. You may feel free to speak to staff about any concerns and/or questions you may have.

If admitted to the program, you will be asked to agree to the “Resident Responsibilities” *AND* sign page #10 of this document.

## **INTRODUCTION**

Arbor House is a Crisis Stabilization program designed to assist you in stabilizing from a mental health crisis. It is a short-term, intensive program and is staffed 24 hours a day by mental health professionals. Arbor House is a program that is an alternative to hospitalization and most residents enter this program voluntarily. By entering the program, you are agreeing to follow the program guidelines and that you will focus on the issues that brought you into our care.

Your active participation is the single most important factor in your treatment. Although you may feel frustrated and challenged at times, your continued involvement in treatment is essential.

The guidelines of Arbor House are designed to ensure the safest possible environment in the least restrictive setting, to assist you with achieving stabilization. By entering Arbor House, you are agreeing with this objective and accept the responsibility to participate in your treatment to the best of your ability.

Below is an outline of the Admission Process for Arbor House. Each item is explained in further detail on the following pages:

1. Drug Screening (pg.# 3)
2. Health Screening (pg.# 3)
3. Bed Bug Protocol (pg.# 3)
4. Personal Property Inventory (pg.# 3)
5. Photo ID (pg.#4)
6. Room Assignment (pg.#4)
7. Treatment Planning (pg.#4)

## **ADMISSION PROCESS DETAILS**

### **Drug Screening**

- You may be screened for both alcohol and drugs. These tests may be repeated at any time during your stay at Arbor House and upon your discharge from the program. You are expected to abstain from alcohol and other drugs during your stay. Positive results at admission do not necessarily preclude your participation in the program.

### **Health Screening**

- A nurse will do a health screening with you. Your medications, both prescription and non-prescription will be given to staff at the time of your admission. These will be stored in a locked cabinet. All medication will be prepared according to your prescriber's written order. A nurse will review your medications with you and the times that you are scheduled to receive them. You will be expected to comply with any medical evaluation and/or treatment necessary, including taking medications as prescribed.

### **Bed Bug Protocol**

- Residents will change into a pair of scrubs and footwear upon admission to Arbor House. Staff will ensure that client clothing does not come in contact with scrubs. No more than seven changes of clothing should be brought to Arbor House - any more than this will be stored and will be returned up on Discharge. (There will be no access to personal belongings that are stored until discharge.)
- Clothing will be washed and dried for resident. After clean clothing has been returned to resident, he/she may change into their own clothing, and scrubs and footwear returned to staff.
- Clothing items brought into Arbor House must be able to go in the dryer. Purses, luggage, backpacks, papers, books, etc. not able to go in the dryer will be wrapped in plastic and stored. Toiletries will be stored in a plastic storage container. Anything purchased while at Arbor House or brought by family/friends will be stored and returned upon discharge.

### **Personal Property Inventory**

- All belongings brought into Arbor House will be inventoried by staff in your presence. Any items that could be considered dangerous or counter-therapeutic will be stored for you until your departure.
- You will be assigned a bin in a locked closet for storage of items including, but not limited to toiletries, cigarettes and lighters. You may obtain these items during break time by requesting them from staff. Weapons, alcohol, and unauthorized drugs are not permitted in the house at any time.
- You will be asked to keep any food you bring in the kitchen, where you may label it with your name.

- Staff members may re-inventory your belongings at any time during your stay.

### **Photo ID**

- Your picture will be taken for inclusion in your Arbor House file.

### **Room Assignment**

- Upon admission you will be assigned to a room that you may be sharing with another individual. During your stay, you may be asked to change rooms to accommodate other program needs.
- Your room is lockable. You will be issued a “swipe card” that can be used to unlock your room. You will be responsible for this card during your stay.

### **Treatment Planning**

- As part of the admission process, you will meet with a clinician who will talk with you about the reasons for your admission to the program, ask about supports available to you in the community, and who will work with you to develop a plan to maximize the benefits of your stay at the program.
- Your plan may include individual and group counseling, medications, and coordination with other persons and/or agencies working with you. There will be various planned activities specific to helping you meet your goals. A daily schedule will be posted for your review.

## **YOUR ROLE AND RESPONSIBILITIES**

### **Program Participation**

- We emphasize a collaborative approach with you in achieving stabilization. We stress your voluntary participation in group meetings, individual sessions, and following the considered advice of the Arbor House staff including prescribers and therapists. In order to allow you to acclimate and become familiar with the program, the routine and new people, we ask that you participate in as much of the program as possible. Since your time in the program is short, the actual amount of time you spend participating in the program with staff is directly related to your progress.
- Arbor House is not a shelter or a long-term residence. Someone who chooses to not participate or cooperate with program guidelines may be asked to leave the program.
- It is appropriate to include family members (or others) in your treatment if interested and appropriate. “Family Meetings” can be arranged for you to meet with them during your stay. These meetings are viewed as a time of therapeutic intervention and/or education. This is separate from visitation on the weekends.

- You will be accompanied by staff if/when you are leaving the grounds, i.e. attending medical appointment.

### **Confidentiality**

- Please respect the privacy and confidentiality of others in the program, as you would wish them to respect yours. The identity of others in the program remains confidential. Anything that is communicated in the program is expected to remain in the program, and will not be discussed outside the program with other residents and staff. The only exceptions to confidentiality rules are legal conditions that are identified in the *“Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded, or Operated by DMHMRSAS”* (pg. 18).

### **Personal Property**

- Staff cannot be responsible for your personal property. You are asked to bring a minimum amount of money (no more than \$200) with you to the program. Please do not bring items that you cannot use, such as laptop computers, cell phones, expensive jewelry, etc. Trading or loaning of property while at Arbor House is prohibited (including lending or selling cigarettes, lending money, and/or giving away personal items.)

### **Personal Hygiene**

- An important part of your self-care is good personal hygiene. This includes daily showering or bathing, changing clothing daily, wearing clean and neat clothing, washing dirty clothes, and picking up after yourself. A washer, dryer and detergent are available for your use, and staff can assist you with operation of the washer and dryer. We will provide access to extra clothing and toiletries if you should need them.
- You will be expected to be dressed appropriately in street clothes while in common areas of the house, and to wear appropriate sleep attire while in bedroom.

### **Sleep**

- Sleep is important to your recovery. Regular sleep habits are necessary for overall good health. We ask that you not consume products containing significant levels caffeine after 4pm each day. We ask that you be in bed by 10:30pm and lights out at 11pm. We expect you to be up and out of bed by 7:00am. We ask that you remain out of bed during the day and participate in the program, as sleeping during the day interferes with your ability to sleep at night.

### **Medications**

- You will be expected to take your medications as prescribed throughout your stay. It will be your responsibility to come to staff when medications are to be taken.

## **STAFF ROLE AND RESPONSIBILITIES**

Staff are available to you 24 hours a day. Staff are present to provide you with support, encouragement, counseling, and to assist you in accessing the supports you have in the community and the resources you need to succeed after discharge from the program.

## **HUMAN RIGHTS**

You will be given information about your human rights, and a sheet with your formal program responsibilities upon admission. You will be asked to acknowledge receipt of both. You will be expected to keep information about yourself and others in the Crisis Stabilization Program confidential.

## **NORMS OF ARBOR HOUSE**

### **Meals**

- Meals will be available three times a day, breakfast, lunch and dinner. If you have dietary restrictions, alternatives will be made available. All food must be consumed in the kitchen and dining room area. No food or drinks, other than water, are permitted in other parts of the house. Any personal food that you bring in must be labeled and kept in the kitchen. We ask that you eat at mealtimes in a communal manner. The kitchen is closed from 10pm to 7am.

### **Computer**

- A computer is available to residents during their stay. Priority is given to those interested in information regarding their recovery. Please use common courtesy and respect towards others when utilizing this equipment

### **Television**

- The television is to be shared by all residents. Volume should remain moderate, and should be off between 10:30pm and 7:00am.

### **Telephone**

- Cell phone use is not permitted during your stay. Any important phone numbers needed during your stay should be copied down during the admission process. Cell phones will be locked up and returned upon your discharge.
- There is a telephone available for resident use in the living room. Please limit phone calls to no more than 10 minutes. Non-emergency phone calls are restricted before 7am and after 10:30pm.
- Please monitor your tone, volume and content of conversation while on the phone.

## Visitors

- Visitors are permitted between 2pm and 5pm on Saturday and Sunday. Requests should be made in writing 24 hours in advance of the visit to allow enough time for approval.
  - Written requests are reviewed by the program supervisor or other designated staff, who make determination of approval.
- You are allowed one hour of visitation per day. It is your responsibility to ask your visitor to leave at the end of their visitation time. You are responsible for seeing that your visitors observe the norms of Arbor House.
- Visitors are only permitted in the common areas of the house (not in bedrooms), and outside.
- Special circumstances will be considered for those under the age of 18.

## Chores

- Each resident will participate and assist in household chores, caring for your own personal space and belongings and care of the common areas. Beds should be made each morning and you should be dressed in street clothes during the daytime. Personal items should be neatly put away and not left on your floor. You will be asked to strip your bed before you leave the program. Always deposit all used linens and towels in appropriate bins in laundry room.

## Outdoor Activities

- Arbor House is located in a residential neighborhood. Please be respectful of your fellow neighbors while outside.

## SAFETY

### Fire Safety

- **TOBACCO USE**
  - All tobacco use is permitted in the courtyard, during designated times. *Please bring enough tobacco with you to last throughout your stay.* There may not be an option to purchase more during your stay. For smokers, please put all butts in the ash cans, and use trashcans for trash.
- **FIRE DRILLS**
  - Fire drills are held on a random schedule once a month. In the event of a fire or a fire drill, please exit the house from the closest exit and proceed to the sidewalk in front of the house. Maps are posted throughout the house noting the exits. Please do not return to the house until asked to do so by staff.

## **Personal Safety**

- *PERSONAL SPACE*
  - Residents are not to enter another resident's bedroom.
  - Residents are expected to refrain from physical and sexual contact with others while residing at Arbor House.
- *NIGHTLY MONITORING*
  - Staff will check on you while you are sleeping to assure your safety. Staff will do their best not to disturb you while you are sleeping.
- *MEDICAL EMERGENCIES*
  - In the event of a medical emergency, staff will call 911 immediately. Paramedics will evaluate you and determine the need for transportation to the hospital.
- *STAYING SAFE*
  - Staff will be available to assist you if you are having difficulty managing your feelings. Please ask for assistance from staff before engaging in harmful or destructive behavior or threats to yourself or others.



## Arbor House Resident Responsibilities

As a resident at Arbor House, I accept that the goal of the program is to assist me in achieving stability. I agree with this goal and accept responsibility to participate in my treatment to the best of my ability. The following guidelines of Arbor House are meant to ensure the safest possible environment for me in the least restrictive setting. While at Arbor House I agree that:

1. I will not be involved in any action or behavior that could cause harm to others or myself. I will refrain from physical and sexual contact.
2. I will not act out problems, but instead will talk out appropriately. Anything I say will be appropriate in terms of content and volume (i.e. no yelling or cursing). Staff will help me control my behaviors, but I am responsible for the consequences of my actions.
3. I will be dressed properly in street clothing when in the common areas.
4. I understand and agree to the Bed Bug Prevention policy.
5. I agree to be accompanied by staff if/when leaving the grounds, unless staff waives this requirement.
6. I agree to participate in scheduled emergency drills.
7. I understand that all medication is presented to staff upon admission. I agree to accept medical evaluation and treatment as recommended, including taking medication as prescribed.
8. I understand and agree to abstain from the use of alcohol and illicit drugs. I agree not to have weapons on the premises.
9. I agree to participate in the recommended program including, group therapy, activities, & individual sessions.
10. I will do my share of household chores on a daily basis.
11. I agree to have my personal belongings inventoried by staff in my presence. I understand and agree with this procedure as stated in the handbook.
12. I agree to let Staff store my cell phone (if I bring one). I understand that I need to retrieve any necessary numbers from my phone upon admission, as my phone will not be made available to me during my stay.
13. I agree to make requests for visitors in writing to staff, and with 24 hours notice. I understand and agree to the visitation schedule.
14. I understand that tobacco use is permitted only outside the house, in the courtyard area, and during designated times of day. I understand I need to bring enough tobacco to last throughout my stay, and I agree to abide by the tobacco use policy.
15. I agree to follow food guidelines.
16. I agree to follow daytime/nighttime schedule as outlined in the handbook and that I am to remain out of my room and engaged in program activities throughout the day.
17. I understand that I am not to enter another resident's room for any reason.
18. I agree that information about my admission to Arbor House will be kept confidential and shared only with staff at my primary mental health care center, and I agree to keep information about myself and others in the Crisis Stabilization Program confidential.

The participant handbook has been given to me and explained to me. I have had the opportunity to ask question about it as well. I understand the contents of this agreement and I agree to comply with the above rules and responsibilities. I understand that if I do not follow thru with my responsibilities I may face dismissal from the program.

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Resident Signature/Date

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Staff Signature/Date

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Print Name